



2002

SENATE RESOLUTION

MR. PRESIDENT:

I offer the following resolution and move its adoption:

A SENATE RESOLUTION to urge the Legislative Council to establish a committee to study the issue of improving cancer outcomes and developing consensus guidelines for healthcare coverage of routine patient care costs associated with oncology clinical trials.

Whereas, the American Cancer Society estimates that 30,000 people from Indiana will be diagnosed with cancer this year;

Whereas, compared to all other states, Indiana's overall cancer death rate ranks 17th among men and 13th among women:

Whereas, cancer clinical trials offer patients the opportunity to obtain new treatments and may be the only therapeutic options available for some seriously ill cancer patients;

Whereas, major advancements in cancer prevention and treatment are the result of quality clinical research and a recognition that patients and providers are reluctant to participate in clinical trials without assurance of health plan



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coverage;

Whereas, approved cancer clinical trials are carefully designed treatment protocols that require external scientific oversight and Institutional Review Board (IRB) approval. In contrast to the continuum of clinical trials, there is widespread "ad hoc" treatment that is uncontrolled, single patient oriented and based on the chance occurrence that a given regimen will work. By not covering the routine patient care costs for participation in cancer clinical trials, there is unwitting support for ad hoc care that may have no value or may be futile. This construct results in great expense and provides no answers to pressing current questions regarding treatment for patients whose cancer has failed to respond to standard therapy or for which no effective standard therapy exists; and

Whereas, regulatory and legislative proposals have been promulgated in a number of states, Indiana is seeking instead to address these issues through a voluntary cooperative effort: Therefore,

Be it resolved by the Senate of the General Assembly of the State of Indiana:

SECTION 1. That the Legislative Council is urged to establish a committee to study the issue of improving cancer outcomes and developing consensus guidelines for healthcare coverage of routine patient care costs associated with oncology clinical trials.

SECTION 2. That if established, the Legislative Council is urged to include representatives of Indiana's cancer care providers, payers and their accounts, and patient advocates on the committee or in an advisory role.

SECTION 3. That the committee, if established, shall conduct studies to identify methods to:

(1) Improve the quality of care for Indiana's cancer patients.



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- (2) Provide greater access to and promote increased patient participation in clinical trials as a treatment option for cancer patients.
- (3) Improve the research climate in Indiana and develop a fair and equitable mechanism for insurance coverage of routine patient care costs when an insured enrollee or subscriber participates in approved cancer clinical trials.
- (4) If determined appropriate by the committee, draft a voluntary agreement that will provide the framework for third party payer coverage of patient care costs for those enrolled in clinical trials within the scope of the individual's benefit plan and to assure patient access to cancer clinical trials in a manner that is both fiscally responsible and medically appropriate.

SECTION 4: That the committee, if established, shall operate under the direction of the Legislative Council and that the committee shall issue a final report when directed to do so by the Council.



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